## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF FLORIDA

CASE NO.: 1:24-CV-21463-ALTMAN/SANCHEZ

## NEREYDA SUHEY CASTILLO MARENCO,

Plaintiff, J.C. PAINTING CONTRACTOR LLC, MARIA GONZALEZ, AND TOMAS GONZALEZ,

VS.

Defendants.

## FACT INFORMATION SHEET - INDIVIDUAL (TO BE COMPLETED BY TOMAS GONZALEZ)

Full Legal Name:			-	
Nicknames or Aliases:				
Residence Address:				
Street	City	State	Zip Co	de
Mailing Address (if different):Street		City	State	Zip Code
Telephone Numbers: (Home)	(Bu	siness)		
Name of Employer:	Position or Job Description:			
Address of Employer:				
Street		City	State	Zip Code
Rate of Pay: \$ per	Average P	aycheck: \$ _		_ per
Average Commissions or Bonuses: \$	per		_ Commissio	ns or bonuses
are based on				
Other Personal Income: \$		from		

	Birthdate:				
Driver's License Number:	oer: Marital Status:				
Spouse's Name:					
Spouse's Address (if different):					
Street	City	State	Zip Code		
Spouse's Social Security Number:		Birthdate:			
Spouse's Employer:					
Spouse's Average Paycheck or Income:	\$		_ per		
Other Family Income: \$(Explain details on the	e back of this sheet	or an additional s	per heet if necessary.)		
Name and Ages of All Your Children (a			. ,		
Child Support or Alimony Paid: \$		per _			
Child Support or Alimony Paid: \$  Names of Others You Live With:		per _			
Child Support or Alimony Paid: \$  Names of Others You Live With:  Who is Head of Your Household?	_ You Spo	per _	Other (list name)		
Child Support or Alimony Paid: \$  Names of Others You Live With:  Who is Head of Your Household?  Checking Account at:	_ You Spo	per use Acco	Other (list name) unt #		
Child Support or Alimony Paid: \$  Names of Others You Live With:  Who is Head of Your Household?  Checking Account at:  Savings Account at:  (Describe all other accounts or investments you on the back of this sheet or an additional sheet	_ You Spo	per	Other (list name) unt #		
Child Support or Alimony Paid: \$  Names of Others You Live With:  Who is Head of Your Household?  Checking Account at:  Savings Account at:  (Describe all other accounts or investments you	_ You Spo may have, including if necessary.)	perperAcco	Other (list name) unt #		
Child Support or Alimony Paid: \$  Names of Others You Live With:  Who is Head of Your Household?  Checking Account at:  Savings Account at:  Describe all other accounts or investments you on the back of this sheet or an additional sheet	_ You Spo may have, includi if necessary.) r Are Buying:	perperAcco	Other (list name) unt #		

Mortgage Owed To:				
Balance Owed: \$	Monthly Payment: \$			
(Attach a copy of the deed or mortgage additional sheet if necessary. Also provide		property on the back of this sheet or an er property you own or are buying.)		
For All Motor Vehicles You	Own or Are Buying:			
Year/Make/Model:	Co	Color:		
Vehicle ID #:	Tag #:	Mileage:		
Names on Title:		Present Value: \$		
Loan Owed To:	Ba	Balance on Loan: \$		
Monthly Payment: \$as boats, motorcycles, bicycles, or aircra	(List all other au aft, on the back of this sheet or an add	tomobiles, as well as other vehicles, such ditional sheet if necessary.)		
	your answer is "yes," describe	al property worth more than \$100 e the property and sale price, and erty.		
Does anyone owe you money? As	mount Owed; \$			
Name and Address of Person Ow	ving Money:			
Reason money is owed:				
Please attach copies of the fe	ollowing:			
a. Your last pay stub (from e	each employer).			
b. Your last 3 statements for account.	r each bank, savings, cred	it union, or other financial		
c. Your motor vehicle regist	rations and titles.			
d. Any deed or titles to any r leases to property you are re		ou own or are buying, or		

## UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT THE FOREGOING ANSWERS ARE TRUE AND COMPLETE.

	TOMAS GONZALEZ	
	 Judgment Debtor	
	Judgment Debtor	Date
STATE OF FLORIDA		
COUNTY OF		
The foregoing instrument was	acknowledged before me t	his day of
, 2024, by <u>TO</u>	MAS GONZALEZ, who is pers	onally known to me or
has produced	as identifi	cation and who
did/did not take an oath.		
Witness my hand and official seal,	this day of	
	Natara Dakii	
	Notary Public State of Florida	
	My Commission Expires:	

MAIL OR DELIVER THE COMPLETED FORM TO THE JUDGMENT CREDITOR OR THE CREDITOR'S ATTORNEY. THIS FORM IS NOT TO BE FILED WITH THE CLERK OF THE COURT.

Dated this \_\_\_\_ day of August 2024.

Brian H. Pollock, Esq.
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